BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

016891-0835

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
(Column				1)	(Column 2)			TYPE		OR	SMALL ENTITY	
TOTAL CLAIMS 9								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBI	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			9 minus 20=		•	0	.	X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			3 minus 3 =		*	6		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT					- 			+135=	·	OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2	1	TOTAL		OR	TOTAL	7/0,00
CLAIMS AS AMENDED - PART II								•			OTHER	
(Column 1) (Column 2						(Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		=		X\$ 9=	:	OR	X\$18=	i
	Independent	*	Minus	***	T O1 4114	=		X40=		OR	X80=	
L	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	I CLAIM		•	+135=		OR	+270=	
•	العليمة الأخلواء فالرام المسلم المراجع المسلم المسلم المراجع				<i>.</i> 		': <b>!</b>	TOTAL ADDIT. FEE		OB	TOTAL ADDIT. FEE	/
	(Column 1) (Column 2) (Colu							NDDII. FEE		,	ADDI1. 1 CL	
AMENDMENT B	ممد	CLAIMS REMAINING AFTER AMENDMENT			HEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	. **	••	= '	ŀ	X\$ 9=		OR	X\$18=	
	Independent	* .	Minus	***		=		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPEND			ENDEN	CLAIM			+135=		OR	+270=	
								TOTAL			TOTAL	
		(0-1 4)	,	(Calou	O\	(Calumn 2)	,	ADDIT. FEE			ADDIT. FEE	
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	IEST BER OUSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	; ;
	Independ nt	*	Minus	***		=	<b> </b>	X40=			X80=	
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM			A-0-		OR	7.00-	
					#OT :			+135=		OR	+270=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											
•	Th "High st Num	b r Previously Pai	d For" (Total or	Independ	ent) is the	highest number	r fou	nd in the app	ropriat box	in col	lumn 1.	